ABSENTEE REQUEST FORM

I,(Name)		, hereby	request that ar	n absentee ballot be	
(Name)			•		
mailed to me for the	election o	on occurring on		I am a registered	
(Primary, General, Special)		(D		rate)	
voter residing at					
	(Address, City,	St. Zip)			
my phone number is			_ and I am re	gistered to vote as a	
☐ Republican ☐ Demo	ocratic	n 🗆 N	Jatural Law	□ Nonpartisan	
The ballot should be mailed to	me at			•	
		(Address, City, St., Zip)			
		·	(Signature)		
		· · · · · · · · · · · · · · · · · · ·	(Date)		